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7590 12/06/2006
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/789,656	02/26/2004	Nicolas G. Adiba	SVL920040006US1/3047P	9176

TITLE OF INVENTION: PEER-TO-PEER REPLICATION MEMBER INITIALIZATION AND DEACTIVATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	03/06/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
VEILLARD, JACQUES	2165	707-100000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member at least one registered attorney or agent) and the names of up to 2 registered patent attorneys or agents OR, if a firm is listed, no name will be printed.				
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev. 03-02 or more recent) attached. Use of a Customer Number is required.		Sawyer Law Group LLP 02/28/2007 PBERRE1 00000048-090460 10789656 3 1400.00 DA 300.00 DA				

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

International Business Machines Corporation Armonk, New York

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)
<input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies _____	<input type="checkbox"/> A check is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 09-0460 (enclose an extra copy of this form).

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Authorized Signature

Date 1/24/2007

Typed or printed name Joseph A. Sawyer, Jr.

Registration No. 30,801

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